



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF CAMPAIGN FINANCE
WASHINGTON, D.C. 20009

REPORT OF RECEIPTS AND EXPENDITURES
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Marcus Goodwin For DC	2. OCF Identification Number PCCCCL186897
Address 1407 Webster Street, NW	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20011	

4. TYPE OF REPORT: **January 31st Report**

This REPORT contains activity for: **Primary Election**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 8/1/2017 through 1/31/2018		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 22,924.20
(b) Cash on Hand at Beginning of Reporting Period	\$ 16,447.99	
(c) Total Receipts [from Line (16)]	\$ 14,061.00	\$ 66,267.34
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 30,508.99	
7. Total Expenditures (from Line 22)	\$ 7,584.79	\$ 43,343.14
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 22,924.20	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

Mr. Marcus Goodwin

TYPE OR PRINT FULL NAME OF CANDIDATE

ELECTRONICALLY CERTIFIED

02/01/2018

SIGNATURE OF CANDIDATE

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CORRECT AND COMPLETE.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(3) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTIONS OR TRANSFER OF FUNDS TO ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION COMMITTEE.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND EXPENDITURES
OCF Form 16, Page 2**

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Marcus Goodwin For DC	REPORT COVERING THE PERIOD FROM: 8/1/2017 TO: 1/31/2018	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 14,061.00	\$ 66,267.34 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 14,061.00	\$ 66,267.34 11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 14,061.00	\$ 66,267.34 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 7,584.79	\$ 43,343.14 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 0.00	\$ 0.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 0.00	\$ 0.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 7,584.79	\$ 43,343.14 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		16,447.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		14,061.00
25. SUBTOTAL (add Lines 23 and 24)		30,508.99
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)		7,584.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		22,924.20

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

1. Full Name, Mailing Address and Zip Code Moe Fridy 1484 Newton St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/12/2017	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Architect Name and Address of Employer Citadel 930 Kennedy St NW Ste 300, Washington, DC 20011		
Aggregate Year-To-date			\$ 100.00
2. Full Name, Mailing Address and Zip Code Karen Schaufeld PO Box 6266, Leesburg, VA 20178	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/12/2017	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Issue Advocate Name and Address of Employer Self PO Box 6266, Leesburg, VA 20178		
Aggregate Year-To-date			\$ 1,000.00
3. Full Name, Mailing Address and Zip Code Nicholas Papadopoulos 900 24th St NW, Washington, DC 20037	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/12/2017	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Sales Name and Address of Employer Papadopoulos Properties 1420b 21st St NW, Washington, DC 20036		
Aggregate Year-To-date			\$ 100.00
4. Full Name, Mailing Address and Zip Code Ting Ng 3300 Fessenden St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/15/2017	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3300 Fessenden St NW, Washington, DC 20008		
Aggregate Year-To-date			\$ 100.00
5. Full Name, Mailing Address and Zip Code Michael McGregor 159 Madison Ave Apt 3D, New York, NY 10016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/26/2017	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Chief Operating Officer Name and Address of Employer Great Oaks Foundation 200 Broadway Fl 3, New York, NY 10038		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 100.00
6. Full Name, Mailing Address and Zip Code Andrew Migdail 47 Clifton Pl Apt 3D, Brooklyn, NY 11238		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/27/2017 Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation VP, Operations Name and Address of Employer Tunecore 63 Pearl St, Brooklyn, NY 11201		
		Aggregate Year-To-date		\$ 25.00
7. Full Name, Mailing Address and Zip Code John Culver 4201 Cathedral Ave NW, Washington, DC 20016		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/29/2017 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Senior Equity Research Analyst Name and Address of Employer Plein Air Capital Advisers, LLC 8304 Oakford Pl, Silver Spring, MD 20910		
		Aggregate Year-To-date		\$ 125.00
8. Full Name, Mailing Address and Zip Code Laurie Davis 2331 Porter St NW, Washington, DC 20008		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/30/2017 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 2331 Porter St NW, Washington, DC 20008		
		Aggregate Year-To-date		\$ 100.00
9. Full Name, Mailing Address and Zip Code Mike Little 1640 Columbia Rd NW, Washington, DC 20009		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/30/2017 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Director Name and Address of Employer Faith and Money Network 1640 Columbia Rd NW, Washington, DC 20009		
		Aggregate Year-To-date		\$ 100.00
10. Full Name, Mailing Address and Zip Code Geoffrey Baker 2410 Wyoming Ave NW, Washington, DC 20008		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/30/2017 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 2410 Wyoming Ave NW, Washington, DC 20008		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 250.00
11. Full Name, Mailing Address and Zip Code Ifiok Inyang 2350 Washington Pl NE, Washington, DC 20018		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/30/2017 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Consultant Name and Address of Employer Deloitte 1919 N Lynn St, Arlington, VA 22209		
		Aggregate Year-To-date		
12. Full Name, Mailing Address and Zip Code Elizabeth Sidamon-Eristoff 1515 15th St NW, Washington, DC 20005		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/31/2017 Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Associate Name and Address of Employer Chemonics International 1717 H St NW Ste 1, Washington, DC 20006		
		Aggregate Year-To-date		
13. Full Name, Mailing Address and Zip Code Triana Brown 148 W St NW Apt B, Washington, DC 20001		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/31/2017 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Development Name and Address of Employer Dance Place 3225 8th St NE, Washington, DC 20017		
		Aggregate Year-To-date		
14. Full Name, Mailing Address and Zip Code Paul Pollinger 3713 Fulton St NW, Washington, DC 20007		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 12/31/2017 Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 3713 Fulton St NW, Washington, DC 20007		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

15. Full Name, Mailing Address and Zip Code Brian Dickerson 200 Q St NE Apt 2422, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 12/31/2017	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Broker Name and Address of Employer West, Lane & Schlager 1155 Connecticut Ave NW Ste 700, Washington, DC 20036		
Aggregate Year-To-date			\$ 25.00
16. Full Name, Mailing Address and Zip Code Rebecca Vogel 1931 Calvert St NW Unit 2, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/01/2018	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer London & Mead 1225 19th St NW Ste 320, Washington, DC 20036		
Aggregate Year-To-date			\$ 25.00
17. Full Name, Mailing Address and Zip Code Richard Cooper 4212 Rosemary St, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/02/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Senior Counsel Name and Address of Employer Williams & Connolly 725 12th St NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 500.00
18. Full Name, Mailing Address and Zip Code Keith Turner 10855 Weisiger Ln, Oakton, VA 22124	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/04/2018	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Vice President Name and Address of Employer Four Points 1805 7th St NW Ste 800, Washington, DC 20001		
Aggregate Year-To-date			\$ 300.00
19. Full Name, Mailing Address and Zip Code Richard Gersten 3526 Edmunds St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/04/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Real Estate Name and Address of Employer PeakGersten Partners 3526 Edmunds St NW, Washington, DC 20007		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 1,000.00
20. Full Name, Mailing Address and Zip Code Zachary Leonsis 3329 Prospect St NW, Washington, DC 20007		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/04/2018 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Senior Vice President Name and Address of Employer Monumental Sports & Entertainment 601 F St NW, Washington, DC 20004		
		Aggregate Year-To-date		
21. Full Name, Mailing Address and Zip Code C.C. Jones 2112 8th St NW, Washington, DC 20001		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/06/2018 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Lawyer Name and Address of Employer Not Employed 2112 8th St NW, Washington, DC 20001		
		Aggregate Year-To-date		
22. Full Name, Mailing Address and Zip Code Phillip Reinhardt 641 S St NW, Washington, DC 20001		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/08/2018 Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual		Occupation CEO Name and Address of Employer PBJ Marketing 641 S St NW, Washington, DC 20001		
		Aggregate Year-To-date		
23. Full Name, Mailing Address and Zip Code Michael Petrucelli 4806 Jamestown Rd, Bethesda, MD 20816		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/08/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Executive Name and Address of Employer PAE 1320 N Courthouse Rd Ste 800, Arlington, VA 22201		
		Aggregate Year-To-date		
24. Full Name, Mailing Address and Zip Code Lauren Hersh 3520 37th St NW, Washington, DC 20016		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/09/2018 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Executive Director Name and Address of Employer PAE 1320 N Courthouse Rd Ste 800, Arlington, VA 22201		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 250.00
25. Full Name, Mailing Address and Zip Code David Aufhuser 3105 36th St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/11/2018	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Williams & Connolly 725 12th St NW, Washington, DC 20005			
		Aggregate Year-To-date		\$ 250.00
26. Full Name, Mailing Address and Zip Code Kylie Gemmell 1950 Jones St Apt 5, San Francisco, CA 94133	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/11/2018	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Real Estate Broker Name and Address of Employer Ellis Partners 111 Sutter St Ste 800, San Francisco, CA 94104			
		Aggregate Year-To-date		\$ 25.00
27. Full Name, Mailing Address and Zip Code Cyrus Sadeghian 6413 Garnett Dr, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/16/2018	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Director of Product Development Name and Address of Employer US Smoke & Fire 12310 Pinecrest Rd Ste 300, Reston, VA 20191			
		Aggregate Year-To-date		\$ 250.00
28. Full Name, Mailing Address and Zip Code John Hambleton 2727 29th St NW, Apt 533, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/17/2018	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer BroadBranch Advisors 2233 Wisconsin Ave NW Ste 520, Washington, DC 20007			
		Aggregate Year-To-date		\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

29. Full Name, Mailing Address and Zip Code Norman Asher 11246 Bienvenida Way Unit 201, Fort Myers, FL 33908	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/17/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 11246 Bienvenida Way Unit 201, Fort Myers, FL 33908		
Aggregate Year-To-date			\$ 250.00
30. Full Name, Mailing Address and Zip Code Hakim Thompson 143 Gates Ave, Montclair, NJ 07042	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/18/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Mortgage Broker Name and Address of Employer STEM Lending 143 Gates Ave, Montclair, NJ 07042		
Aggregate Year-To-date			\$ 100.00
31. Full Name, Mailing Address and Zip Code Samuel Tyler 1735 Lamont St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/18/2018	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Teacher Name and Address of Employer Univeristy California at Davis 1 Shields Ave, Davis, CA 95616		
Aggregate Year-To-date			\$ 25.00
32. Full Name, Mailing Address and Zip Code Connie Spinner 1416 35th St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/24/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer Community College Preparatory Academy 2405 Martin Luther King Jr Ave SE, Washington, DC 20020		
Aggregate Year-To-date			\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

33. Full Name, Mailing Address and Zip Code Chester Marshall 2041 Martin Luther King Jr Ave SE, Ste 107, Washington, DC 20020	Contribution Type <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/25/2018	Amount of Each Receipt This Period \$ 40.00
Contributor Type Individual	Occupation Founder/President Name and Address of Employer Institute of African Man Development 2041 Martin Luther King Jr Ave SE, Ste 107, Washington, DC 20020		
Aggregate Year-To-date		\$ 40.00	
34. Full Name, Mailing Address and Zip Code William Hunt 2253 13th St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation CEO Name and Address of Employer Hunt Communications 4017 8th St NE Apt 1, Washington, DC 20017		
Aggregate Year-To-date		\$ 5.00	
35. Full Name, Mailing Address and Zip Code Martina Benton 2875 Woodland Dr NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired 2875 Woodland Dr NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 1,000.00	
36. Full Name, Mailing Address and Zip Code Gwendolyn Washington 133 Chesapeake St SW, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Public Defender Service 633 Indiana Ave NW, Washington, DC 20004		
Aggregate Year-To-date		\$ 100.00	
37. Full Name, Mailing Address and Zip Code Evevaudnee Bryant-James 538 Nicholson St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Sales Rep Name and Address of Employer Blue Cross Blue Shield 10701 Parkridge Blvd Ste 20171, Reston, VA 20191		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 50.00
38. Full Name, Mailing Address and Zip Code Imani Ellis Cheek Sy 220 Madison St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/27/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Attorney		
		Name and Address of Employer FCC 445 12th St SW, Washington, DC 20554		
		Aggregate Year-To-date		\$ 100.00
39. Full Name, Mailing Address and Zip Code Carolyn Steptoe 1257 Lawrence St NE, Washington, DC 20017		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/27/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Manager		
		Name and Address of Employer Self 1257 Lawrence St NE, Washington, DC 20017		
		Aggregate Year-To-date		\$ 50.00
40. Full Name, Mailing Address and Zip Code Uchechi Roxo 1509 Lawrence St NE, Washington, DC 20017		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/27/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Africa Regional Advisor		
		Name and Address of Employer Social Solution Inc 3 Bethesda Metro Ctr Fl 16, Bethesda, MD 20814		
		Aggregate Year-To-date		\$ 50.00
41. Full Name, Mailing Address and Zip Code Barbara Moore 3856 Porter Street NW, Washington, DC 20016		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/27/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Manager		
		Name and Address of Employer Jubilee Housing 1640 Columbia Rd NW #2, Washington, DC 20009		
		Aggregate Year-To-date		\$ 200.00
42. Full Name, Mailing Address and Zip Code Naomi Barry-Perez 629 Morton Pl NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/27/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Director of Civil Rights		
		Name and Address of Employer U.S. Department of Labor 200 Constitution Ave NW, Washington, DC 20210		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 100.00
43. Full Name, Mailing Address and Zip Code Marilyn Milloy 1716 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Deputy Editor Name and Address of Employer AARP The Magazine 601 E St NW, Washington, DC 20049			
		Aggregate Year-To-date		\$ 100.00
44. Full Name, Mailing Address and Zip Code Rosalyn Overstreet Gonzalez 1215 Clifton St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 40.00	
Contributor Type Individual	Occupation Staff Attorney Name and Address of Employer Public Defender Service 633 Indiana Ave NW, Washington, DC 20004			
		Aggregate Year-To-date		\$ 40.00
45. Full Name, Mailing Address and Zip Code David Erickson 1324 Lawrence St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1324 Lawrence St NE, Washington, DC 20017			
		Aggregate Year-To-date		\$ 100.00
46. Full Name, Mailing Address and Zip Code Teresa Lee 2317 Gaylord Dr, Suitland, MD 20746	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Retired 2317 Gaylord Dr, Suitland, MD 20746			
		Aggregate Year-To-date		\$ 100.00
47. Full Name, Mailing Address and Zip Code Darryl Gorman 1810 Randolph St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Senior Labor & Employee Relations Officer Name and Address of Employer Montgomery County Government 101 Monroe St Fl 2, Rockville, MD 20850			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 100.00
48. Full Name, Mailing Address and Zip Code Beverly Keith 825 10th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Property Manager Name and Address of Employer Hines Construction 1301 K St NW, Washington, DC 20005			
		Aggregate Year-To-date		\$ 50.00
49. Full Name, Mailing Address and Zip Code Kenneth Burris 1728 Buchanan St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/27/2018	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Nurse Name and Address of Employer Virginia Tech 1728 Buchanan St NE, Washington, DC 20017			
		Aggregate Year-To-date		\$ 25.00
50. Full Name, Mailing Address and Zip Code Katherine Stephen 3040 Dumbarton St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/28/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Journalist Name and Address of Employer Self-Employed 3040 Dumbarton St NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 50.00
51. Full Name, Mailing Address and Zip Code Morgan Kennedy 582 Regent Pl NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/28/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Federal Trade Commission 600 Pennsylvania Ave NW, Washington, DC 20580			
		Aggregate Year-To-date		\$ 100.00
52. Full Name, Mailing Address and Zip Code Susan Spaulding 5150 Fulton St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/29/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Administrator Name and Address of Employer St. Albans School 3101 Wisconsin Ave NW, Washington, DC 20016			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

	Aggregate Year-To-date			\$ 50.00
53. Full Name, Mailing Address and Zip Code Dennis Perkins 1805 7th St NW Ste 800, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/30/2018	Amount of Each Receipt This Period \$ 750.00	
Contributor Type Individual	Occupation Broker			
	Name and Address of Employer Civitas Commercial Real Estate Services 1805 7th St NW Ste 800, Washington, DC 20001			
	Aggregate Year-To-date			\$ 750.00
54. Full Name, Mailing Address and Zip Code John Aggrey 2400 16th St NW Apt 604, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/30/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Consultant			
	Name and Address of Employer The Unicorn Group 718 7th St NW, Washington, DC 20001			
	Aggregate Year-To-date			\$ 50.00
55. Full Name, Mailing Address and Zip Code Michael Guimond 718 7th St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/30/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Sales Rep			
	Name and Address of Employer Bisnow 718 7th St NW Fl 2, Washington, DC 20001			
	Aggregate Year-To-date			\$ 50.00
56. Full Name, Mailing Address and Zip Code John Sunter 1805 7th St NW Ste 800, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/30/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Real Estate Developer			
	Name and Address of Employer Four Points, LLC 1805 7th St NW Ste 800, Washington, DC 20001			
	Aggregate Year-To-date			\$ 50.00
57. Full Name, Mailing Address and Zip Code Hilary Odonnell 2801 Lee Hwy Unit 203, Arlington, VA 22201	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/30/2018	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Program Manager			
	Name and Address of Employer IMF 700 19th St NW, Washington, DC 20431			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 500.00
58. Full Name, Mailing Address and Zip Code Jason Zuccari 2997 Eskridge Rd, Fairfax, VA 22031	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/30/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Sales Rep Name and Address of Employer Hamilton Insurance 4100 Monument Corner Dr, Fairfax, VA 22030			
		Aggregate Year-To-date		\$ 200.00
59. Full Name, Mailing Address and Zip Code Susan Fennell 6648 32nd St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/31/2018	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employeed 6648 32nd St NW, Washington, DC 20015			
		Aggregate Year-To-date		\$ 25.00
60. Full Name, Mailing Address and Zip Code Anoop Dave 2400 M St NW, Washington, DC 20037	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/31/2018	Amount of Each Receipt This Period \$ 301.00	
Contributor Type Individual	Occupation Real Estate Manager Name and Address of Employer Bernstein Companies 3299 K St NW Ste 700, Washington, DC 20007			
		Aggregate Year-To-date		\$ 301.00
61. Full Name, Mailing Address and Zip Code George Chopivsky 1300 19th St NW Ste 725, Washington, DC 20036	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/31/2018	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Individual	Occupation Managing Principal Name and Address of Employer FORTIS Company 1300 19th St NW Ste 725, Washington, DC 20036			
		Aggregate Year-To-date		\$ 1,000.00
62. Full Name, Mailing Address and Zip Code Carter Mitchell 5311 Waneta Rd, Bethesda, MD 20816	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 01/31/2018	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Doctor Name and Address of Employer MedStar 18109 Prince Philip Dr, Olney, MD 20832			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

		Aggregate Year-To-date		\$ 250.00
63. Full Name, Mailing Address and Zip Code Vance Gragg 8714 Ramsey Ave, Silver Spring, MD 20910		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/31/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Not Employed 8714 Ramsey Ave, Silver Spring, MD 20910		
		Aggregate Year-To-date		
64. Full Name, Mailing Address and Zip Code Juan Cardona 7603 Georgia Ave NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/31/2018 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Real Estae Manager Name and Address of Employer Gragg Cardona Partner 7603 Georgia Ave NW Ste 204, Washington, DC 20012		
		Aggregate Year-To-date		
65. Full Name, Mailing Address and Zip Code Nicholas Giannotti 4001 Harris Pl, Alexandria, VA 22304		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 01/31/2018 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Solar Developer Name and Address of Employer New Columbia Solar 401 New York Ave NE Fl 2, Washington, DC 20002		
		Aggregate Year-To-date		
		Aggregate Year-To-date		\$ 250.00
TOTAL This Period (Aggregate of all Receipt pages)				\$ 14,061.00

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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

Marcus Goodwin For DC

1. Full Name, Mailing Address and Zip Code Carl Thomas 808 Kennedy St NE, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 12/16/2017	Amount of Each Expenditure This Period \$ 3,000.00
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code Staples 1901 L St NW, Washington, DC 20036	Purpose of Expenditure Campaign Materials	Date (month, day, year) 01/13/2018	Amount of Each Expenditure This Period \$ 88.59
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Carl Thomas 808 Kennedy St NE, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 01/17/2018	Amount of Each Expenditure This Period \$ 3,000.00
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Grady Grant 5776 2nd St NE, Washington, DC 20011	Purpose of Expenditure Campaign Materials	Date (month, day, year) 01/23/2018	Amount of Each Expenditure This Period \$ 770.10
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Print Depot 7941 Central Ave, Capitol Heights, MD 20743	Purpose of Expenditure Campaign Materials	Date (month, day, year) 01/26/2018	Amount of Each Expenditure This Period \$ 726.10
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 7,584.79